

BENEFICIARY DESIGNATION FOR FIDELITY INVESTMENTS® 403(b)(7) CUSTODIAL ACCOUNT AND FIDELITY INVESTMENTS 401(a) PROTOTYPE PLAN

Instructions: Please complete this form if you are opening a new Fidelity 403(b)(7) account and/or a Fidelity 401(a) Plan account ("Fidelity Accounts") and want to designate a beneficiary or if you want to change your existing beneficiary designation. You may revoke this form and designate a different beneficiary by completing and filing another beneficiary form with Fidelity. Please return this form to:

Fidelity Tax-Exempt Retirement Services P.O. Box 31401 Salt Lake City, UT 84131-9921

If you have questions regarding how to fill out this form, please call Fidelity Tax-Exempt Retirement Services at (800) 343-0860, Monday-Friday, 8 a.m. to 8 p.m. ET.

I am:

☐ opening a new Fidelity Account(s).

☐ changing my existing beneficiary designation for my Fidelity Account(s).

1. Your Information

Name

_____-_____-_____
Social Security Number

Your Employer

The following applies if you:

1) are a participant in the Fidelity 401(a) Prototype Plan, and/or

2) have adopted the Fidelity 403(b)(7) Custodial Account, and your account is subject to ERISA.

Please note: If you are married and you do not designate your spouse as your primary beneficiary for at least 50% of your account balance, your spouse must consent to this designation by signing the Spousal Consent section below in the presence of a notary public or a representative of the plan.

I hereby designate the person(s) named below as primary beneficiary(ies) to receive payment of the value of my Fidelity Account(s) upon my death.

2. Your Primary Beneficiary(ies)

1. _____ %
Name Share*

_____ Relationship
Date of Birth

2. _____ %
Name Share*

_____ Relationship
Date of Birth

3. _____ %
Name Share*

_____ Relationship
Date of Birth

***Shares for your primary beneficiary(ies) must total 100%.
Please use whole percentages.**

If more than one person is named and no percentages are indicated, payment shall be made in equal shares to my primary beneficiary(ies) who survives me. If a percentage is indicated and a primary beneficiary(ies) does not survive me, the percentage of that beneficiary's designated share shall be divided equally among the surviving primary beneficiary(ies).

If there is no primary beneficiary(ies) living at the time of my death, I hereby specify that the value of my Fidelity 403(b) Accounts is to be distributed to my contingent beneficiary(ies) listed in Section 3.

3. Your Contingent Beneficiary(ies)

1. _____ %	
Name _____	Share** _____
Date of Birth _____	Relationship _____
2. _____ %	
Name _____	Share** _____
Date of Birth _____	Relationship _____
3. _____ %	
Name of Trust (if applicable) _____	Share** _____
Date of Birth _____	Relationship _____

****Shares for your contingent beneficiary(ies) must total 100%.
Please use whole percentages.**

Payment to contingent beneficiaries will be made according to the rules of succession described under Section 2 "Primary Beneficiary(ies)."

NOTE: If the beneficiary is a trust, please indicate the trust's name and address, the date of the trust and the trustee's name.

4. Spousal Consent

If you are a participant in the Fidelity 401(a) Plan and/or your 403(b) plan is subject to ERISA (for example, if your employer is not a government unit or church and makes contributions) and if you do not specify your spouse as your primary beneficiary for at least 50% of your account balance, your spouse must sign the consent portion of this form in the presence of a notary public or a representative of the Plan.

I hereby consent to the designation of the beneficiary(ies) listed above. I hereby acknowledge that I understand (1) that the effect of such designation is to cause my spouse's death benefit, or a portion of it, to be paid to a beneficiary other than me; (2) that each beneficiary designation is not valid unless I consent to it; and (3) that my consent is irrevocable unless my spouse revokes the beneficiary designation.

Signature of Participant's Spouse _____ Date _____

Witness _____ Title _____

5. Signature

I understand that if I choose not to designate any beneficiary(ies) or if I am not survived by any beneficiary, my beneficiary will be my surviving spouse, or, if I do not have a surviving spouse, my estate. I am aware that this form becomes effective when delivered to Fidelity and will remain in effect until I deliver to Fidelity another form with a later date. The beneficiary information provided herein shall apply to all my Fidelity Accounts as described above, for which Fidelity Management Trust Company (or its affiliate and/or any successor appointed pursuant to the terms of such 403(b)(7) account or 401(a) Plan, as applicable) acts as custodian or trustee, and shall replace all previous designation(s) I have made on any of my Fidelity Accounts.

Your Signature _____ Date _____



**Fidelity Investments
Tax-Exempt Services Company**

A Division of Fidelity Investments
Institutional Services Company, Inc.

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